

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10630567</u>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
1	/						51		/				
2		/					52	/					
3		/					53		/				
4		/					54		/				
5		/					55		/				
6		/					56		/				
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44		/					94						
45		/					95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50		/					100						
TOTAL IND.	←		←		←		TOTAL IND.	5 ←		←		←	
TOTAL DEP.	←		←		←		TOTAL DEP.	58 ←		←		←	
TOTAL CLAIMS	←		←		←		TOTAL CLAIMS	63 ←		←		←	